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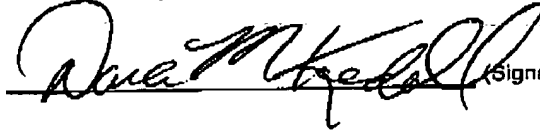
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FACSIMILE TRANSMITTAL SHEET &**FAX RECEIVED****CERTIFICATE OF TRANSMISSION UNDER 37 CFR §1.8** SEP 20 2002**GROUP 1600**

**TO: Assistant Commissioner of Patents
United States Patent and Trademark Office
Examiner: Michael A. Willis
Fax No. (703) 872-9308
Phone No. (703) 305-1679**

OFFICIAL

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on September 19, 2002, to the above-identified facsimile number.

 (Signature)

**FROM: Dara M. Kendall
Fax No. (513) 626-1355
Phone No. (513) 626-1789**

Listed below are the item(s) being submitted with this Certificate of Transmission:

- 1) Change of Correspondence Address;
- 2) Petition for 3-month Extension of Time, and one copy for authorization to charge fee to Deposit Account;
- 3) Transmittal for Response;
- 4) Response/Amendment (8 pages)
- 5) Terminal Disclaimer, and one copy for authorization to charge fee to Deposit Account

Number of Pages Including this Page: 17

Inventor(s): Vatter
S.N.: 09/802,048
Filed: 7/10/2001
Conf. No.: 7755
Case: 8163

Comments:

To Whom It May Concern:

IN THE UNITED STATES PATENT & TRADEMARK OFFICE
RESPONSE/AMENDMENT

Case Docket No. 8163

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:

Inventor(s): Vatter et al.

Confirmation No. 7755

Serial No.: 09/902,048

Group Art Unit: 1617

Date Filed: 7/10/2001

Examiner: Michael A. Willis

Title: Transfer-Resistant Makeup Removing Compositions

1. ☒ No additional fee is known to be required.
2. ☐ The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA*	RATE	FEE
TOTAL	* 12	MINUS	** 12	= 0	x \$18 =	\$
INDEP.	* 02	MINUS	*** 03	= 0	x \$84 =	\$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$280 =	\$
					TOTAL	\$

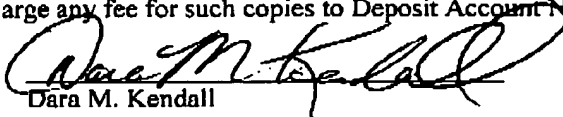
* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the highest number of total claims previously paid for is less than 20, write "20" in this space.

*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

3. ☐ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.
 - a. ☒ Any patent application processing fees under 37 CFR §1.16.
 - b. ☒ Any patent application processing fees under 37 CFR §1.17.
4. The Commissioner is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.


Dara M. Kendall
Attorney for Applicants
Registration No. 43,709
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September 19, 2002

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